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UTILITY PATENT APPLICATION TRANSMITTAL

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|---|---------------------|-----------------------------------|--|--|
| UTILITY PATENT APPLICATION TRANSMITTAL | Attorney Docket No. | | 21854-00032-US1 | |
| | First Inventor | | Michael White | |
| | | LOGISTICS CHAIN MANAGEMENT SYSTEM | | |
| | Title | | | |

(Only for new nonprovisional applications under 37 CFR 1.53(b)) Express Mail Label No. MS Patent Application APPLICATION ELEMENTS Commissioner for Patents ADDRESS TO: P.O. Box 1450 See MPEP chapter 600 concerning utility patent application contents. Alexandria, VA 22313-1450 CD-ROM or CD-R in duplicate, large table or Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original, and a duplicate for fee processing) lх Computer Program (Appendix) Nucleotide and/or Amino Acid Sequence Submission Applicant claims small entity status. Х 8. See 37 CFR 1.27. (if applicable, all necessary) x | Specification [Total Pages 12 Computer Readable Form (CRF) (preferred arrangement set forth below)
- Descriptive title of the invention b. Specification Sequence Listing on: Cross Reference to Related Applications CD-ROM or CD-R (2 copies); or Paper - Cross Reference to Related Applications
- Statement Regarding Fed sponsored R & D
- Reference to sequence listing, a table, Statements verifying identity of above copies or a computer program listing appendix Background of the Invention Brief Summary of the Invention **ACCOMPANYING APPLICATION PARTS** - Brief Description of the Drawings (if filed) 9. Assignment Papers (cover sheet & document(s)) - Detailed Description Claim(s)
- Abstract of the Disclosure 37 CFR 3.73(b) Statement 10. (when there is an assignee) Attorney X Drawing(s) (35 U.S.C. 113) [Total Sheets 11. English Translation Document (if applicable) Information Disclosure Copies of IDS 5. Oath or Declaration Total Sheets 12. X Statement (IDS)/PTO-1449 Citations Newly executed (original or copy) 13. Preliminary Amendment X Copy from a prior application (37 CFR 1.63(d)) Return Receipt Postcard (MPEP 503) 14. (for continuation/divisional with Box 18 completed) (Should be specifically itemized) Certified Copy of Priority Document(s) 15. **DELETION OF INVENTOR(S)** (if foreign priority is claimed) Signed statement attached deleting inventor(s) Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). named in the prior application. 16. see 37 CFR 1.63(d)(2) and 1.33(b). Applicant must attach form PTO/SB/35 or its equivalent. 17. 6. X Application Data Sheet. See 37 CFR 1.76 18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data S heet under 37 CFR 1.76: X Continuation-in-part (CIP) of prior application No.: Continuation Divisional 10/398,460 D. St. Cyr Prior application information: Examiner For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. 19. CORRESPONDENCE ADDRESS Customer Number: 30678 Х Correspondence address below Name Address Zip Code City State Country felephone Fax Name (Print/Type) Morris Liss Registration No. (Attorne y/Agent) 24,510 Signature



PTO/SB/17 (10-03)
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| | | | Complete if Known | | | | | | |
|---|-----------------------------|--|-------------------|-------------|---|---------------|--|--|--|
| fee TRANSMITTAL for FY 2004 | | Application Number CIP of 10/398,460 | | | | | | | |
| | | Filing Date | | | Concurrently Herewith | | | | |
| Effective 10/01/2003, Patent fees are subject to annual revision. | | First Named Inventor | | | ntor Michael White | Michael White | | | |
| | Examiner Name | | | ame | Not Yet Assigned | • | | | |
| X Applicant claims small entity status. See 37 CFR 1.27 | | | ni# | | N/A | | | | |
| TOTAL AMOUNT OF PAYMENT (\$) 385.00 | Art Unit | | | cket Ne | | | | | |
| | | | | | | | | | |
| METHOD OF PAYMENT (check all that apply) | FEE CALCULATION (continued) | | | | | | | | |
| Check Credit Money Order Other None | 3. ADDITIONAL FEES | | | | | | | | |
| X Depos it Account: | | | | | | | | | |
| Deposit | | e Entity | Small | Entity | _ | | | | |
| Account 22-0185 | Fee Code | Fee (\$) | Fee Code | Fee (\$) | Fee Description | Fee Pald | | | |
| Deposit | | • | | | , | | | | |
| Account Name Connolly Bove Lodge & Hutz LLP | 1051 | 130 | 2051 | 65 | Surcharge – late filing fee or oath | | | | |
| The Director is authorized to: (check all that apply) | 1052 | 50 | 2052 | 25 | Surcharge – late provisional filing fee or cover sheet. | | | | |
| X Charge fee(s) indicated below X Cred it any overpayments | 1053 | 130 | 1053 | 130 | Non-English specification | | | | |
| X Charge any additional fee(s) or any underpayment of fee(s) | 1812 | 2,520 | 1812 | 2 520 | For filing a request for ex parte reexamination | | | | |
| | 1804 | 920* | 1804 | 920* | Requesting publication of SIR prior to | | | | |
| Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account. | 1805 | 1,840* | 1805 | 1.840° | Examiner action Requesting publication of SIR after | | | | |
| FEE CALCULATION | 1251 | 110 | 2251 | | Examiner action Extension for reply within first month | | | | |
| 1. BASIC FILING FEE | 1252 | 420 | 2252 | | Extension for reply within second month | | | | |
| Large Entity Small Entity | 1253 | 950 | 2253 | | Extension for reply within third month | | | | |
| Fee Fee Fee Fee <u>Fee Description</u> Fee Paid | 1254 | 1,480 | 2254 | | Extension for reply within fourth month | | | | |
| Code (\$) Code (\$) 1001 770 2001 385 Utility filing fee 385.00 | 1255 | 2,010 | 2255 | | E xtension for reply within fifth month | | | | |
| 1002 340 2002 170 Design filling fee | 1401 | 330 | 2401 | | Notice of Appeal | | | | |
| 1003 530 2003 265 Plant filing fee | 1402 | 330 | 2402 | | Filing a brief in support of an appeal | | | | |
| 1004 770 2004 385 Reissue filing fee | 1403 | 290 | 2403 | | Request for oral hearing | | | | |
| 1005 160 2005 80 Provision at filing fee | 1451 | 1,510 | 1451 | 1,510 | P etition to institute a public use proceeding | | | | |
| SUBTOTAL (1) (\$) 385.00 | 1452 | 110 | 2452 | 55 | Petition to revive – unavoidable | | | | |
| 30310 /AE (1) (\$\psi\$) 363.66 | 1453 | 1,330 | 2453 | 665 | Petition to revive - unintentional | | | | |
| 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE | 1501 | 1,330 | 2501 | 665 | Utility issue fee (or reissue) | | | | |
| Extra Fee from Claims below Fee Paid | 1502 | 480 | 2502 | 240 | Design issue fee | | | | |
| Total Claims 1 -20** = x = 0.00 | 1503 | 640 | 2503 | 320 | Plant issue fee | | | | |
| Independent 1 -3** = | 1460 | 130 | 1460 | 130 | Petitions to the Commissioner | | | | |
| Multiple Dependent = | 1807 | 50 | 1807 | 50 | Processing fee under 37 CFR 1.17(q) | | | | |
| Large Entity Small Entity | 1806 | 180 | 1806 | 180 | Submission of Information Disclosure Stmt | | | | |
| Fee Fee Fee Fee Code (\$) Fee Description | 8021 | 40 | 8021 | 40 | Recording each patent assignment per | | | | |
| 1202 18 2202 9 Claims in excess of 20 | 1809 | 770 | 2809 | 385 | Filing a submission after final rejection | | | | |
| 1201 86 2201 43 Independent claims in excess of 3 | 1009 | 770 | 2009 | 300 | (37 CFR 1.129(a)) | | | | |
| 1203 290 2203 145 Multiple dependent claim, if not paid | 1810 | 770 | 2810 | 385 | For each additional invention to be examined (37CFR 1.129(b)) |][| | | |
| 1204 86 2204 43 ** Reissue independent claims | 1801 | 770 | 2801 | 385 | ' ' | | | | |
| over original patent 1205 18 2205 9 ** Reissue claims in excess of 20 | 1802 | 900 | 1802 | 900 | Request for expedited examination of a design application | - | | | |
| and over original patent | Other fee (specify) | | | | | | | | |
| SUBTOTAL (2) (\$) 0.00 | | *Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 0.00 | | | | | | | |
| **or number previously paid, if greater; For Reissues, see/above | | | | | | | | | |
| SUBMITTED BY (Complete (if applicable)) | | | | | | | | | |
| Name (Print/Type) Morris Liss | Regist (Attorn | ration No ey/Agent) | 24 | ,510 | Telephone (202) 331-7111 | | | | |
| Signature Date 3(2/04 | | | | | | | | | |
| | /- | | | | | | | | |